	APOLLO HOSPITALS, SECUNDERABAD		AAC – 05
			Issue: C
	POLICY ON INITIAL ASSESSMENT AND REASSESSMENT OF PATIENTS		Date: 06-01-2017
			Page 1 of 4
PREPARED BY: Dy.Medical Superintendent		APPROVED BY: Chief Executive Officer	

### 1.0 Purpose:

To assure care provided to each patient is based on an assessment of the patient's relevant physical, psychological and nutritional status needs resulting in care that the patient is seeking in the best setting possible.

### 2.0 Scope:

All Patients at Apollo Hospitals, Secunderabad

### 3.0 Responsibility:


Hospital Administrator and All care providers

### 4.0 Policy:


**4.1** Each patient upon admission to Apollo Hospitals, Secunderabad shall be assessed by qualified individuals for appropriate care or treatment needs / need for further assessment. The physical, psychological, social and economic status of each in-patient shall be assessed.

**4.2** The patient shall be assessed and the records shall be documented as appropriate to the patient's age and needs.

**4.3** Outpatient assessment - the Physician shall assess outpatients during the visit.

	APOLLO HOSPITALS, SECUNDERABAD	AAC – 05
		Issue: C
	POLICY ON INITIAL ASSESSMENT AND REASSESSMENT OF PATIENTS	Date: 06-01-2017
		Page 2 of 4
PREPARED BY:  Dy.Medical Superintendent		APPROVED BY:  Chief Executive Officer

- 4.4 The physician as deemed appropriate for patient condition shall perform follow-up visit assessments.
- 4.5 A duly registered and credentialed staff Physician shall either perform or supervise the performance of a patient assessment within 24 hours. The assessment shall include documented plan of care with preventive aspects of care.
- 4.6 In emergency room the patient shall be assessed by the emergency room team immediately on arrival and documentation shall be completed. In the mean time the patient shall be given appropriate treatment to stabilize him/her. The concerned doctor shall be immediately informed about the patient arrival.
- 4.7 The nursing assessment shall be performed and documented in the patient record within **24 hours of admission.**
- 4.8 The nutritional assessment shall be completed within 24 hours of admission of the patient.
- 4.9 Continued assessments and reassessments shall be documented throughout the patient's medical record.

	APOLLO HOSPITALS, SECUNDERABAD		AAC – 05
			Issue: C
	POLICY ON INITIAL ASSESSMENT AND REASSESSMENT OF PATIENTS		Date: 06-01-2017
			Page 3 of 4
PREPARED BY: Dy.Medical Superintendent		APPROVED BY: Chief Executive Officer	


**4.10** Reassessment of the patient shall be performed at regular intervals in the course of care by medical and nursing staff.

- A. Reassessments shall be performed to determine a patient's response to care/treatment.
- B. Reassessment shall take place also when there is a significant change in a patient's condition or a change in diagnosis.
- C. Nursing staff shall reassess patients as per the standards maintained in the department.
- D. Medical staff shall reassess patients once daily.
- E. More frequent reassessments shall be done by both nurses and doctors as per the clinical condition of the patient.

**4.11** Assessment and reassessment are documented in the following reports:

- A. Medical Staff:
- B. Nursing Staff:
- C. Nutritional services as appropriate.

**CONTROLLED COPY  
QUALITY DEPARTMENT**

	APOLLO HOSPITALS, SECUNDERABAD	AAC – 05
		Issue: C
	POLICY ON INITIAL ASSESSMENT AND REASSESSMENT OF PATIENTS	Date: 06-01-2017
		Page 4 of 4
PREPARED BY:  Dy.Medical Superintendent		APPROVED BY:  Chief Executive Officer

**Qualified professionals perform assessment are Registered as applicable under the law of the land:**

Professional	Basic Qualification	Registration
Medical	M.B.B.S	Registered with the Centre / State Medical Council
Nursing	Diploma / Degree in Nursing	Registered with the Centre / State Nursing Council
Dietician	Master's Degree in Dietetics	Not required

## **5.0 Multidisciplinary approach**

- 5.1 Qualified individuals shall form a multidisciplinary team and shall be responsible for the patient's care.
- 5.2 Information shall be shared among the staff while giving hand off's.
- 5.3 The patient's record shall only be available to authorized personnel who are the care givers.
- 5.4 Referral policies and procedures shall be followed.

**CONTROLLED COPY  
QUALITY DEPARTMENT**